FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State

Parties must be filed electronically. Reset Form COMMITTEE NAME (Must be same as on Statement of Organization) Ed Sass for Supervisor FORM IMPORTANT: Indicate by # type of committee you are reporting for: DR-2 DISCLOSURE (1)Statewide/Legislative/Judge Standing for Retention Candidate (2)State PAC (3)State Party (Rev. 12/2009) REPORT (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (For Office Use Only Comm. # 19375 CANDIDATE COMMITTEES ONLY: Candidate Name Logged In Political Party (if applicable) Ed Sass Scanned Democrat Computer _ Office Sought District (if Senate or House) Supervisor Audited Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports. SIGNATURE OF PERSON FILING REPORT **TELEPHONE** DATE SIGNED I AM FILING A _10/19/2014 REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. (report date) Indicate by # ☐CHECK IF AMENDMENT TO REPORT DATED _ Local Committees, enter Date of Election ☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. 1-4-14 (You must continue to file reports until a DR-3 is filed.) County & Local Committees, enter County in which Election is held BenTOI STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)\$ 0.00 ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 1,060.00 Schedule F: Loans Received total (Attach Schedule F).... Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) SUB-TOTAL....\$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)..... 1,060.00 Schedule F: Loan Repayments total (Attach Schedule F)... CASH ON HAND at the end of this reporting period (if final report balance must be zero)\$ 0.00 **UNPAID BILLS (From Schedule D - Attach Schedule D).....\$ 560.00 *IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$ **OUTSTANDING LOANS (From Schedule F - Attach Schedule F)......\$ CONSULTANT BREAKDOWN (Schedule G Attached?)

YES

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds)

Reset Form	S
J. J. J.	

SCHEDULE	
(Rev. 12/13)	MONETARY RECEIPTS

COMMITTER	NAME	Must be same			
	CI	Wust be same	e as on S	tatement of	Organizati
	to	SMEC	0	A COLLEGE	Organization

CHECK THIS BOX IF
AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any

RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER ID#		ESS OF CONTRIBUTOR	TO CANDID	ATE* PECENTER	√ IF FUNI RAISI
9/25/14	CK# ?		ty Democrats	My	\$ 500,40	INCO
10/3/14	CK# Zash	Ed Sass 6505 32nd Ave Shellsburg 1A52	se1f 332	My Party Self	560,00	
	CK#					
	ID# CK#					
	ID#				-	
	CK#					
	CK#					
	D# CK#					
10	D#					
C	K#					
CF	< #					
CK						
	1		TOTAL	SUB-TOTAL	\$ 1060,00	
losure law requires	candidate committees to d	lisclose the relationship of any re degree of consanguinity (blood as candidate, but there is no	TOTAL (if last page	e of this schedule)	\$ 1060,00	

committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) . If surname of contributor is the same as candidate, but there is no Page (for Schedule A)

familial relationship,

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA SCHEDULE B MONETARY (Rev. 07/03) **EXPENDITURES** CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be		AVAILABLE FROM THE IOWA	CHECK THIS BOX IF AMENDING FORM
	same as on Statement of Organization Suparvisor)	J. O.
EXPENDED (if applicable)	NAME AND ADDRESS TO WHOM	DUD	
(MM/DD/YR) (If applicable) AND PAC CHECK NUMBER	(Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACT	ION) AMOUNT EXPENDED
atomos P#			
TENED CK# &C	Ille	020	2000
10/02/14 CK# 6893	Vinton Live wire		300
ID#	108 E, 3th St Vinten A 52 349	Supervisor Add for 4 weeks	
10/03/14 CK# 6894	The Star Press Union P.O. Box 208	Supervisor Add for	360,00
OLELIU ID# A	Bella Place 10 For	4 weeks	256.00
8/5/14 CK# Credit Gard	Advertising And Supply 7630 Cass St.	100 Sighs	
ID#	Om4hq NE 68114	for Ed Sass for Supervis	or 444.00
CK#			
ID#			-
ID#			
CK#			
ID#			
CK#			
	TO	SUB-TOT	AL \$ 10/0 M
HIS BOX APPLIES TO CANDIDATES' CO	OMMITTEES ONLY:	TAL (if last page of this schedu	le) \$ 1060.00

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to

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Page	1	
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FOR INSTR	UCTIONS, SEE BACK OF FORM		
NOTE: De	Sass for Supervisor bbts previously reported that remain unpaid must be included on the hedule, as well as any new obligations incurred in this period.	nis Reset Form	SCHEDULE D INCURRED INDEBTEDNESS CHECK THIS BOX IF AMENDING
DEBTS/C	DBLIGATIONS REMAINING THIS REPORTING PER INCLUDE LOANS SHOW LOANS ON SCHEDUL		An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting point.
INCURRED (MM/DD/YR)	TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS SERVICES PROVIDED O PURCHASED	CLOSE OF REPORTING
8 5 14	Ed Sass 6505 32nd Ave Shellsburg 1A52332	Campaign Sign	\$ \$ 444.00
10/3/14	Ed Sass 6505 32nd Ave Shellsburg 1A 52332	Supervisor add	116.00

*If actual figure is unknown, show "estimated" beside the figure.

Page. (for Schedule D)

SUB-TOTAL \$

CANDIDATE COMMITTEES NOTE:

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD